

B5 (Official Form 5) (12/07)

## FORM 5. INVOLUNTARY PETITION

United States Bankruptcy Court Southern District of Texas		INVOLUNTARY PETITION
IN RE (Name of Debtor - If Individual: Last, First, Middle) <b>Westbury Community Hospital, LLC</b>		ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.)  <b>a Delaware limited liability company, d/b/a Westbury Hospital</b>
Last four digits of Social-Security or other Individual's Tax-ID No./Complete EIN (If more than one, state all.) <b>27-1823311</b>		
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) <b>6060 Richmond Avenue, Suite 380 Houston, TX 77057</b>		MAILING ADDRESS OF DEBTOR (If different from street address)
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS <b>Harris</b>		
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses)  <b>5556 Gasmer Dr., Houston, TX 77035; 6600 Hornwood Dr., Houston, TX 77004; 2001 Cedar Bayou, Baytown, TX 77520</b>		
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11		
INFORMATION REGARDING DEBTOR (Check applicable boxes)		
<b>Nature of Debts</b> (Check one box)  Petitioners believe: <input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business debts	<b>Type of Debtor</b> (Form of Organization) <input type="checkbox"/> Individual (Includes Joint Debtor) <input checked="" type="checkbox"/> Corporation (Includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  <hr/>	<b>Nature of Business</b> (Check one box) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other
<b>VENUE</b> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District.		<b>FILING FEE</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. <i>[If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.]</i>
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.)		
Name of Debtor	Case Number	Date
Relationship	District	Judge
ALLEGATIONS (Check applicable boxes)		COURT USE ONLY
1. <input checked="" type="checkbox"/> Petitioner(s) are eligible to file this petition pursuant to 11 U.S.C. § 303(b). 2. <input checked="" type="checkbox"/> The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code. 3.a. <input checked="" type="checkbox"/> The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; or 3.b. <input type="checkbox"/> Within 120 days preceding the filing of this petition, a custodian, other than a trustee, receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.		

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Name of Debtor Westbury Community Hospital, LLCCase No. 11-33626

## TRANSFER OF CLAIM

Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

## REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X Feroze Bhandara, President  
Signature of Petitioner or Representative (State title)

5556 Gasmer, LP 4/25/11  
Name of Petitioner Date Signed

Name & Mailing Feroze Bhandara / President  
Address of Individual 6060 Richmond, Suite 380  
Signing in Representative Houston, TX 77057  
Capacity

X Edward L. Rothberg

Signature of Attorney

Date 4/27/11

Edward L. Rothberg

Name of Attorney Firm (If any)

Hoover Slovacek LLP  
5847 San Felipe, Suite 2200  
Houston, TX 77057

Address

Telephone No. 713.977.8686

X Feroze Bhandara, Trustee  
Signature of Petitioner or Representative (State title)

Bhandara Family Revocable Living Trust 4/25/11  
Name of Petitioner Date Signed

Name & Mailing Feroze Bhandara, Trustee  
Address of Individual 6060 Richmond Avenue, Suite 380  
Signing in Representative Houston, TX 77057  
Capacity

X Edward L. Rothberg

Signature of Attorney

Date 4/27/11

Edward L. Rothberg

Name of Attorney Firm (If any)

Hoover Slovacek LLP  
5847 San Felipe, Suite 2200  
Houston, TX 77057

Address

Telephone No. 713.977.8686

X Judy Leigh Montoya  
Signature of Petitioner or Representative (State title)

Bidulfo Montoya 4/25/11  
Name of Petitioner Date Signed

Name & Mailing Bidulfo Montoya / Owner  
Address of Individual d/b/a Lucy's Commerical Services  
Signing in Representative 16926 Judy Leigh Drive  
Capacity Houston, TX 77084

X Edward L. Rothberg

Signature of Attorney

Date 4/27/11

Edward L. Rothberg

Name of Attorney Firm (If any)

Hoover Slovacek LLP  
5847 San Felipe, Suite 2200  
Houston, TX 77057

Address

Telephone No. 713.977.8686

## PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim
5556 Gasmer, LP 6060 Richmond, Suite 380 Houston, TX 77057	Past due rent for approximately 100,508 square feet in the building located at 5556 Gasmer Drive, Houston, TX 77081	<u>210,000.00</u>
Name and Address of Petitioner Bhandara Family Revocable Living Trust 6060 Richmond Avenue, Suite 380 Houston, TX 77057	Past due rent for approx. 27,046 sq.ft., Suites 6612, 6614, 6620, 6636, 6648 and 6656 Hornwood Drive, Houston, TX	<u>81,138.00</u>
Name and Address of Petitioner Bidulfo Montoya d/b/a Lucy's Commerical Services 16926 Judy Leigh Drive Houston, TX 77084	Nature of Claim Construction	<u>6,020.00</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <u>440,489.89</u>

1 continuation sheets attached

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Name of Debtor Westbury Community Hospital, LLC  
Case No. \_\_\_\_\_

## TRANSFER OF CLAIM

Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

## REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

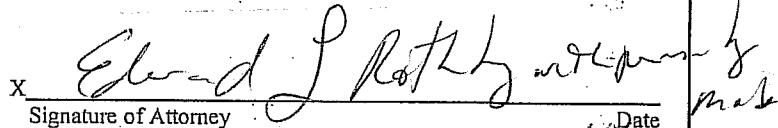


Signature of Petitioner or Representative (State title)

Sehgal &amp; Sons Enterprises, L.P.

4/26/2011

Name of Petitioner \_\_\_\_\_ Date Signed \_\_\_\_\_  
 Name & Mailing \_\_\_\_\_  
 Address of Individual \_\_\_\_\_  
 Signing in Representative \_\_\_\_\_  
 Capacity \_\_\_\_\_  
 Kunal Puri/ Vice-President  
 Sehgal & Sons Enterprises  
 d/b/a Ultra Building Services  
 10501 Corporate Drive  
 Stafford, TX 77477

X 

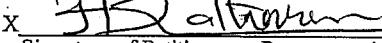
Signature of Attorney

Date 4/27/11

Edward L. Rothberg

Name of Attorney Firm (If any)

Hoover Slovacek LLP  
 5847 San Felipe, Suite 2200  
 Houston, TX 77057  
 Address \_\_\_\_\_  
 Telephone No. 713.977.8686

X 

Signature of Petitioner or Representative (State title)

HDK Enterprises, Inc.

dba Southside LTC Pharmacy

Name of Petitioner \_\_\_\_\_

Date Signed 4/26/11

Name & Mailing \_\_\_\_\_  
 Address of Individual \_\_\_\_\_  
 Signing in Representative \_\_\_\_\_  
 Capacity \_\_\_\_\_  
 Harish Katharani/ President  
 7700 Main Street, Suite 200  
 Houston, TX 77030

X 

Signature of Attorney

Date 4/27/11

Edward L. Rothberg

Name of Attorney Firm (If any)

Hoover Slovacek LLP  
 5847 San Felipe, Suite 2200  
 Houston, TX 77057  
 Address \_\_\_\_\_  
 Telephone No. 713.977.8686

PETITIONING CREDITORS		
Name and Address of Petitioner Sehgal & Sons Enterprises, L.P. d/b/a Ultra Building Services 10501 Corporate Drive Stafford, TX 77477	Nature of Claim Janitorial/Floor Maintenance Service	Amount of Claim 7,094.56
Name and Address of Petitioner HDK Enterprises, Inc. dba Southside LTC 7700 Main Street, Suite 200 Pharmacy Houston, TX 77030	Nature of Claim Pharmacist salary, pharmacist techs salary, and pharmaceuticals dispensed at Westbury Community Hospital	Amount of Claim \$136,237.33
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 440,489.89

1 of 1 continuation sheets attached